OHIO DEPARTMENT OF HEALTH PERMIT TRANSMITTAL FOR PRIVATE WATER SYSTEMS

Fees submitted for the Private Water Systems Program by the Board of Health as per Sections 3701.344, 3701.347, and 1521.05 of the Revised Code and Section 3701-28-06 of the Administrative Code. Fees and forms must be submitted as required in section 3709.092 of the Revised Code.

Name of Health District:

Ohio Department of Health State Fee

Number	Amount	Туре
3	x \$ 74.00	New Installation Permits
	x \$ 0.00	Alteration Permits
	x \$ 0.00	Sealing Permits
	\$ 222.00	Total ODH State Fee amount accompanying this report

Ohio Department of Natural Resources State Fee

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Number		Total Amt Collected	LHD Retained		Submitted ODNR Amt	Туре
L	X	\$ 20.00	x \$2.00	X	\$ 18.00	New Installation Permits requiring a well log
	\$	60. ²⁰	\$ 6.00	\$	57.	Total ODNR State Fee amount accompanying this report

This is to certify that the private water systems listed on the attached permit report and summarized above have been issued in accordance with Chapter 3701-28 of the Ohio Administrative Code and that permits were issued.

Date From:

04/01/15

State Of Ohlo

GENERAL RECEIPT

OHIO DEPARTMENT OF HEALTH

ENVIRNM. HLTH & RAD

Receipt #: 00605748

Batch #: 16-1811

Received For: MEIGS COUNTY GHD

From: MEIGS CO AUDITOR

Date Received: 9/2/2015

Amount: \$222.00

Check #: 14033

For: PRIVATE WATER SYSTEMS

Received By: Sandy Gilkerson

VCTODEF / U//VVVII. XXXXXIII - A. ...

**If state fees are not collected or permits are not issued during the above referenced quarterly time periods, transmittals and reports must still be submitted by the above referenced submittal date.

HEA 5435 (REV 06/2011) Ohio Department of Health

OHIO DEPARTMENT OF HEALTH PRIVATE WATER SYSTEMS PERMIT REPORT

Name of Health District	h District		Permits Issued		Pernit Year	- 2	Quarter	
	Meigs County		(h)		2017	25	Ð	
Contact Person		Phone *	Date From		,	Date To		
Steve Swatze	E 2 7 2 -	182h hhh 0hc	24 B			06/30/15	Š	
Z > 1	System Owner	System Address System Address (include street number, street name, direction, city, zip)	Code	Type	Private Water Systems Contractor Name	ystems ame	00H \$74,00)	ODNR Amount (\$18.00)
V 8939		icy (PP)	**************************************		Smithswell Drilling 74, 8	Z	<u>ئے</u> 2	\$ 00 \$ 00 \$ 00
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Source Code 1. Well 2. Spring 7. Combination of	Source Code 1. Well 2. Spring 3. Pond 4. Cistem 5. H 7. Combination of systems not including a well 8	5. Hauled Water Storage Tank 6. Combination of systems including a well 8. Conversion of a well not previously approved as a PWS into a PWS	ems including a well PWS into a PWS 9. Test Well	*	Ŏ	o Po	Conly add to the control of the cont	Only add totals to last page)
Pemit Type	A Allearation	Quarters Quarters	3d 3md Managan this d		3			

N - New Construction

A - Alteration

S - Sealing

1st Quarter: Jan 1 - Mar 31 2nd Quarter: Apr 1 - Jun 30

3rd Quarter: Jul 1 - Sep 30
4th Quarter: Oct 1 - Dec 31